

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J56376

Entity Name: SOUTHEAST FLORIDA PARTS, INC.

FILED  
Mar 06, 2009  
Secretary of State

## Current Principal Place of Business:

% ORAL L. GOBLE  
6626 NW 20TH AVE  
FT LAUDERDALE, FL 33309

## New Principal Place of Business:

% ORAL L. GOBLE  
5620 NW 12 AVE  
FT LAUDERDALE, FL 33309

## Current Mailing Address:

% ORAL L. GOBLE  
6626 NW 20TH AVE  
FT LAUDERDALE, FL 33309

## New Mailing Address:

% ORAL L. GOBLE  
5620 NW 12 AVE  
FT LAUDERDALE, FL 33309

FEI Number: 65-0000829

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GOBLE, ORAL L.  
6626 NW 20TH AVE  
FT LAUDERDALE, FL 33309 US

## Name and Address of New Registered Agent:

GOBLE, ORAL L.  
5620 NW 12 AVE  
FT LAUDERDALE, FL 33309 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

03/06/2009

Electronic Signature of Registered Agent

Date

## Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: GOBLE, ORAL L.,  
Address: 11787 W ATLANTIC BLVD. #6  
City-St-Zip: CORAL SPGS, FL 33071

Title: DT ( ) Delete  
Name: GOBLE, LINDA M.,  
Address: 11787 W ATLANTIC BLVD #6  
City-St-Zip: CORAL SPGS, FL 33071

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: GOBLE, ORAL L.,  
Address: 11130 HERON BAY BLVD #416  
City-St-Zip: CORAL SPGS, FL 33076

Title: DT (X) Change ( ) Addition  
Name: GOBLE, LINDA M.,  
Address: 11130 HERON BAY BLVD #416  
City-St-Zip: CORAL SPGS, FL 33076

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ORAL L. GOBLE

MR.

03/06/2009

Electronic Signature of Signing Officer or Director

Date